



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Zuniga-Ortiz, et al.

Serial No.: 10/057,138

Filed: 01/25/02

Title: Flip-Chip Without Bumps and Polymer for Board Assembly

Docket No.: TI-33986

Art Unit: 2827

Examiner: Thai, Luan C.

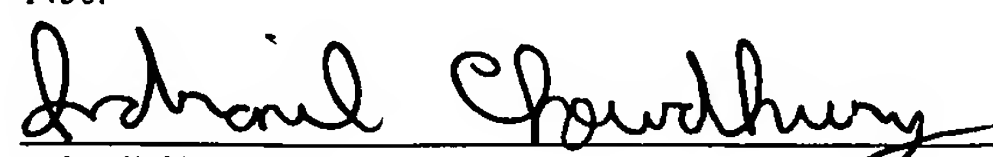
Conf. No.: 1847

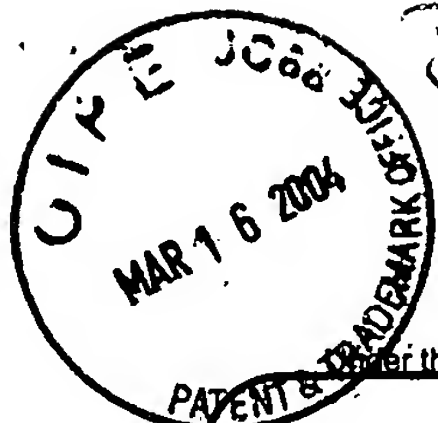
Mail Stop Non-Fee Amendment
Commissioner for Patents
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REPLY TO NOTICE OF NON-COMPLIANT AMENDMENT UNDER 37 CFR 1.121

Dear Sir:

In reply to the Notice of Non-Compliant Amendment dated February 12, 2004 regarding the above-identified patent application, please enter the following corrected Amendments to the Claims section for the amendment mailed December 30, 2003.

Date of Deposit: 3/11/04
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Indranil Chowdhury
Registration No.: 47,490



Image

2827

PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/057,138	
	Filing Date	January 25, 2002	
	First Named Inventor	Edgar R. Zuniga-Ortiz	
	Art Unit	2827	
	Examiner Name	Thai, Luan C.	
Total Number of Pages in This Submission	12	Attorney Docket Number	TI-33986

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Acknowledgment Postcards
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Indranil Chowdhury Registration No.: 47,490
Signature	
Date	March 11, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name		Indranil Chowdhury	
Signature		Date	March 11, 2004

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